

# DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 868020

IA NUMBER: PCT/ IB99 / 01593

FAMILY NAME: AISA

GIVEN NAME: VALERIO

PRIORITY CLAIMED (Y/N): Y

NO BASIC FEE (Y/N): N

ATTORNEY DOCKET NUMBER: 108041-7

CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 0000000000 FAX

RECEIPT DATE: 06 / 12 / 01

IA FILING DATE: ~~09~~ / 29 / 99

DELAY WAIVED (Y/N): Y

DEMAND RECEIVED (Y/N): Y

PRIORITY DATE: ~~09~~ / 30 / 98

US DESIGNATED ONLY (Y/N): N

COUNTRY:

NAME: PATRICIA A SHEEHAN

CESARI AND MCKENNA

STREET: 88 BLACK FALCON AVENUE

CITY: BOSTON

STATE/COUNTRY: MA ZIP: 02210

EMAIL:

APPLICATION TITLES:

SYSTEM FOR PROGRAMMING A HOUSEHOLD APPLIANCE HAVING AN ELECTRONIC CONT  
ROL

TAB TO LAST POSITION, PUSH SEND



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COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
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Bib Data Sheet

CONFIRMATION NO. 5481

<b>SERIAL NUMBER</b> 09/868,020	<b>FILING DATE</b> 06/12/2001 <b>RULE</b>	<b>CLASS</b> 700	<b>GROUP ART UNIT</b> 2121	<b>ATTORNEY DOCKET NO.</b> 108041-7
<b>APPLICANTS</b> Valerio Aisa, Fabriano, ITALY; <b>** CONTINUING DATA *****</b> THIS APPLICATION IS A 371 OF PCT/IB99/01593 09/29/1999 <i>CSB</i> <b>** FOREIGN APPLICATIONS *****</b> ITALY T098A000822 09/30/1998 <i>CSB</i>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>CSB</i> Examiner's Signature <i>CSB</i> Initials <i>CSB</i>		<b>STATE OR COUNTRY</b> ITALY	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 36
			<b>INDEPENDENT CLAIMS</b> 1	
<b>ADDRESS</b> Patricia A Sheehan Cesari and McKenna 88 Black Falcon Avenue Boston ,MA 02210				
<b>TITLE</b> System for programming a household appliance having an electronic control				
<b>FILING FEE RECEIVED</b> 1278	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	